



MISSOURI ETHICS COMMISSION
COMMITTEE DISCLOSURE REPORT COVER PAGE

1. DATE OF REPORT

7/15/2006

OFFICE USE ONLY

pm jr

INSTRUCTIONS ON REVERSE SIDE

M.E.C. ID NO. 6051123

2. FULL NAME OF COMMITTEE

Bill Alter for State Senate

3. COMMITTEE MAILING ADDRESS

1800 Gravois Road

4. COMMITTEE TELEPHONE NUMBER

636-677-8191

CITY/STATE/ZIP

High Ridge, MO 63049

5. TREASURER'S NAME

Angela Alter-Wren

6. TREASURER'S MAILING ADDRESS

1802 Gravois Road

7. TREASURER'S TELEPHONE NUMBER

HOME: 636-677-7177

WORK: —

CITY/STATE/ZIP

High Ridge, MO 63049

8. DEPUTY TREASURER'S NAME

☒ CHECK IF NO DEPUTY TREASURER

9. DEPUTY TREASURER'S MAILING ADDRESS

10. DEPUTY TREASURER'S TELEPHONE NUMBER

HOME:

WORK:

11. DATE OF ELECTION

August 8, 2006

12. TYPE OF ELECTION (CHECK ONE)

☒ PRIMARY

☐ GENERAL

☐ SPECIAL

13. TIME PERIOD COVERED BY THIS STATEMENT

FROM April 1, 2006

THROUGH June 30, 2006

14. CANDIDATE COMMITTEES ONLY: LIST CANDIDATE'S NAME, ADDRESS, PHONE, OFFICE SOUGHT, POLITICAL SUBDIVISION AND POLITICAL PARTY

William (Bill) Alter
1800 Gravois Road
High Ridge, MO 63049
636-677-8191
State Senate - District 22
Republicans

15. TYPE OF REPORT:

☐ 15 DAY AFTER CAUCUS NOMINATION

☒ COMMITTEE QUARTERLY REPORT

☐ JAN 15

☐ APRIL 15

☒ JULY 15

☐ OCT 15

☐ 8 DAYS BEFORE ELECTION

☐ 30 DAYS AFTER ELECTION

☐ TERMINATION (ATTACH FORM CO-3)

☐ SEMIANNUAL DEBT REPORT

☐ JAN 15

☐ JULY 15

☐ ANNUAL SUPPLEMENTAL, JAN 15

☐ 15 DAYS AFTER PETITION DEADLINE

☐ OTHER

☐ AMENDING PREVIOUS REPORT DATED

— - 20 —

☒ CHECK IF INCUMBENT

☒ REPUBLICAN

☐ DEMOCRAT

☐

16. COMMITTEE TREASURER'S SIGNATURE

I CERTIFY THAT THIS REPORT, COMPRISED OF THIS COVER PAGE AND ALL ATTACHED FORMS, IS COMPLETE, TRUE AND ACCURATE.

TREASURER'S SIGNATURE

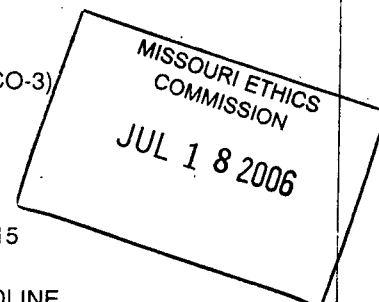
Angela Alter-Wren

17. CANDIDATE'S SIGNATURE

(CANDIDATE COMMITTEES ONLY) I CERTIFY THAT THIS REPORT, COMPRISED OF THIS COVER PAGE AND ALL ATTACHED FORMS, IS COMPLETE, TRUE AND ACCURATE.

CANDIDATE'S SIGNATURE

William L. Alter





Missouri Ethics Commission
REPORT SUMMARY
INSTRUCTIONS ON REVERSE SIDE

NAME OF COMMITTEE

Bill Attner for State Senate

DATE OF REPORT

7/15/2006

OFFICE USE ONLY

RECEIPTS	A. THIS PERIOD	B. THIS ELECTION	STATEMENT OF BEGINNING AND ENDING FINANCIAL CONDITION	
1. TOTAL RECEIPTS FOR THIS ELECTION PREVIOUSLY REPORTED		\$20,278.20	MONEY ON HAND	
2. ALL MONETARY CONTRIBUTIONS RECEIVED THIS PERIOD	\$ 9745.00			
3. ALL LOANS RECEIVED THIS PERIOD	+			
4. MISCELLANEOUS RECEIPTS THIS PERIOD	+			
5. SUBTOTAL MONETARY RECEIPTS THIS PERIOD (SUM 2A + 3A + 4A)	\$ 9745.00		25. MONEY ON HAND AT THE BEGINNING OF THIS REPORTING PERIOD (INCLUDING FUNDS IN DEPOSITORY, CASH, SAVINGS ACCOUNTS AND ALL OTHER INVESTMENTS)	\$ 7,256.64
6. IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD	+		26. MONETARY RECEIPTS THIS PERIOD (FROM ITEM 5)	+\$ 9745.00
7. TOTAL ALL RECEIPTS THIS PERIOD (SUM 5A + 6A)	\$ 9745.00		27. MONETARY DISBURSEMENTS MADE THIS PERIOD (SUM 11 + 17 + 24)	
8. FUNDS USED FOR REPAYING LOANS THIS PERIOD	-		a) Disbursements By Check \$ 367.41	-\$ 3712.41
9. TOTAL ALL RECEIPTS THIS ELECTION (SUM 1B + 7A - 8A)		\$ 30,023.20	b) Disbursements By Cash \$ 15.00	
EXPENDITURES	A. THIS PERIOD	B. THIS ELECTION	28. MONEY ON HAND AT THE CLOSE OF THIS REPORTING PERIOD (SUM 25 + 26 - 27)	\$ 13,289.23
10. TOTAL EXPENDITURES FOR THIS ELECTION PREVIOUSLY REPORTED		\$ 12,821.56	INDEBTEDNESS	
11. EXPENDITURES MADE BY CASH OR CHECK THIS PERIOD	\$ 3712.41			
12. IN-KIND EXPENDITURES MADE THIS PERIOD	+			
13. DEBTS INCURRED THIS PERIOD (NOT INCLUDING LOANS)	+			
14. TOTAL ALL EXPENDITURES MADE THIS PERIOD (SUM 11A + 12A + 13A)	\$ 3712.41		29. OUTSTANDING INDEBTEDNESS AT THE BEGINNING OF THIS PERIOD	\$
15. TOTAL EXPENDITURES THIS ELECTION (SUM 10B + 14A)		\$ 16,533.97	30. LOANS RECEIVED THIS PERIOD	+
CONTRIBUTIONS MADE	A. THIS PERIOD	B. THIS ELECTION	31. NEW DEBTS INCURRED THIS PERIOD	+
16. TOTAL CONTRIBUTIONS MADE FOR THIS ELECTION PREVIOUSLY REPORTED		\$ 200.00	32. PAYMENTS MADE ON LOANS THIS PERIOD	-\$
17. ALL MONETARY CONTRIBUTIONS MADE THIS PERIOD	\$		33. CREDITS RECEIVED ON LOANS THIS PERIOD	-\$
18. ALL IN-KIND CONTRIBUTIONS MADE THIS PERIOD	+		34. PAYMENTS MADE THIS PERIOD ON DEBTS INCURRED IN PREVIOUS PERIOD	-\$
19. TOTAL ALL CONTRIBUTIONS MADE THIS PERIOD (SUM 17A + 18A)	\$		35. TOTAL INDEBTEDNESS AT THE CLOSE OF THIS REPORTING PERIOD (SUM 29 + 30 + 31 - 32 - 33 - 34)	\$
20. TOTAL ALL CONTRIBUTIONS MADE THIS ELECTION (SUM 16B + 19A)		\$ 200.00		
OTHER DISBURSEMENTS	A. THIS PERIOD	B. THIS ELECTION		
21. FUNDS USED FOR REPAYING LOANS THIS PERIOD	+			
22. PAYMENTS THIS PERIOD ON PREVIOUSLY REPORTED DEBTS INCURRED	+			
23. ANY MISCELLANEOUS DISBURSEMENT NOT REPORTED ELSEWHERE	+			
24. TOTAL OTHER DISBURSEMENTS THIS PERIOD (SUM 21A + 22A + 23A)	\$			



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS AND LOANS RECEIVED
INSTRUCTIONS ON REVERSE SIDE

OFFICE USE ONLY

1. NAME OF COMMITTEE <i>Bill Alter for State Senate</i>		2. REPORT DATE <i>7/15/2006</i>	
A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.		4. DATE RECEIVED ----- AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST)			
NAME: <i>Floris George</i> ADDRESS: <i>2790 Marble Springs Rd</i> CITY / STATE: <i>Barnhart mo 63012</i> EMPLOYER: <i>St Anthony's Hospital / Nurse</i> <input type="checkbox"/> COMMITTEE:		<i>7/18/2006</i> \$ <i>200.00</i>	\$ <i>200.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>Freeman Physicians Group PAC</i> ADDRESS: <i>P.O. Box 41264</i> CITY / STATE: <i>Joplin, mo 64803</i> EMPLOYER: <i>Freeman Physicians Group</i> <input checked="" type="checkbox"/> COMMITTEE:		<i>7/18/2006</i> \$ <i>650.00</i>	\$ <i>650.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>Michael Staenberg</i> ADDRESS: <i>2127 Innerbelt Business Ctr Dr.</i> CITY / STATE: <i>St Louis, mo 63117</i> EMPLOYER: <i>HP Realty / CEO</i> <input type="checkbox"/> COMMITTEE:		<i>7/18/2006</i> \$ <i>650.00</i>	\$ <i>650.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>David Klarich</i> ADDRESS: <i>438 Galesford Drive</i> CITY / STATE: <i>Ballwin, mo 63021</i> EMPLOYER: <i>Self / Lobbyist</i> <input type="checkbox"/> COMMITTEE:		<i>7/18/2006</i> \$ <i>45</i>	\$ <i>450.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>West County Republican Organization</i> ADDRESS: <i>820 Woodside Trails</i> CITY / STATE: <i>Ballwin, mo 63021</i> EMPLOYER: <i>Self / Lobbyist</i> <input type="checkbox"/> COMMITTEE:		<i>7/18/2006</i> \$ <i>250.00</i>	\$ <i>250.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
6. SUBTOTAL: ITEMIZED CONTRIBUTIONS THIS PAGE (SUM COLUMN 5)		\$ <i>2200.00</i>	
7. SUBTOTAL: ITEMIZED CONTRIBUTIONS ANY ATTACHED PAGES		+ \$ <i>7425.00</i>	
8. TOTAL: ITEMIZED CONTRIBUTIONS THIS PERIOD (SUM 6 + 7)		\$ <i>9625.00</i>	
9. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS MONETARY CONTRIBUTIONS		\$ <i>9625.00</i>	
10. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS IN-KIND CONTRIBUTIONS		\$	
B. NON-ITEMIZED CONTRIBUTIONS RECEIVED (LIST BY CATEGORY, NOT BY INDIVIDUAL CONTRIBUTIONS)		AMOUNT RECEIVED	
11. TOTAL CONTRIBUTIONS RECEIVED AT FUND-RAISERS AS REPORTED INLINE 8 ON FORM CD1A		\$	
12. TOTAL ANONYMOUS CONTRIBUTIONS RECEIVED FROM PERSON GIVING \$25 OR LESS		\$ <i>0.00</i>	
13. TOTAL MONETARY CONTRIBUTIONS RECEIVED FROM PERSONS GIVING \$100 OR LESS		\$ <i>120.00</i>	
14. TOTAL IN-KIND CONTRIBUTIONS RECEIVED FROM PERSONS (NOT COMMITTEES) GIVING \$100 OR LESS		\$	
C. LOANS RECEIVED			
15. NAME AND ADDRESS OF LENDER		16. DATE RECEIVED	17. AMOUNT OF LOAN (IF MORE THAN \$100 ATTACH CD-1B)
NAME: ADDRESS: CITY / STATE:			\$
NAME: ADDRESS: CITY / STATE:			\$
18. SUBTOTAL: LOANS THIS PAGE (SUM COLUMN 17)		\$	
19. SUBTOTAL: LOANS FROM ANY ATTACHED PAGES		\$	
20. TOTAL: LOANS THIS PERIOD (SUM 18 + 19)		\$	
21. TOTAL: ALL IN-KIND CONTRIBUTIONS (SUM 10 + 14)		\$	
22. TOTAL: ALL MONETARY CONTRIBUTIONS (SUM 9, 11, 12 & 13)		\$ <i>9745.00</i>	
23. MONETARY CONTRIBUTIONS & LOANS RECEIVED REQUIRING A RECORD OF NAME & ADDRESS (SUM 9, 13 & 20)		\$ <i>9745.00</i>	



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS AND LOANS RECEIVED
INSTRUCTIONS ON REVERSE SIDE



1. NAME OF COMMITTEE <i>Dill After for State Senate</i>		2. REPORT DATE <i>7/15/2006</i>	
A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.		4. DATE RECEIVED AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: <i>Elect Nodler Comm. For</i> ADDRESS: <i>P.O. Box 608</i> CITY / STATE: <i>Carthage, Mo 64836</i> EMPLOYER: <input checked="" type="checkbox"/> COMMITTEE:		<i>7/18/2006</i> \$ <i>650.00</i>	\$ <i>650.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>Frisbie Engineering, Inc.</i> ADDRESS: <i>3520 Jeffco Blvd #100</i> CITY / STATE: <i>Arnold, Mo 63010</i> EMPLOYER: <input type="checkbox"/> COMMITTEE:		<i>7/18/2006</i> \$ <i>650.00</i>	\$ <i>650.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>Thomson Paint Company</i> ADDRESS: <i>608 W. Kings Highway</i> CITY / STATE: <i>St. Charles, Mo 63051</i> EMPLOYER: <input type="checkbox"/> COMMITTEE:		<i>7/18/2006</i> \$ <i>100.00</i>	\$ <i>100.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>Imperial Services, LLC</i> ADDRESS: <i>1238 Main Street</i> CITY / STATE: <i>Imperial, Mo 63052</i> EMPLOYER: <input type="checkbox"/> COMMITTEE:		<i>7/18/2006</i> \$ <i>650.00</i>	\$ <i>650.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>Derrick R. Good</i> ADDRESS: <i>4043 Fawn Hollow</i> CITY / STATE: <i>House Springs, Mo 63051</i> EMPLOYER: <i>The Thomson Law Firm / Attorney</i> <input type="checkbox"/> COMMITTEE:		<i>5/7/2006</i> \$ <i>650.00</i>	\$ <i>650.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
6. SUBTOTAL: ITEMIZED CONTRIBUTIONS THIS PAGE (SUM COLUMN 5)			\$ <i>2700.00</i>
7. SUBTOTAL: ITEMIZED CONTRIBUTIONS ANY ATTACHED PAGES			+ \$
8. TOTAL: ITEMIZED CONTRIBUTIONS THIS PERIOD (SUM 6 + 7)			\$
9. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS MONETARY CONTRIBUTIONS			\$
10. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS IN-KIND CONTRIBUTIONS			\$
B. NON-ITEMIZED CONTRIBUTIONS RECEIVED (LIST BY CATEGORY, NOT BY INDIVIDUAL CONTRIBUTIONS)			AMOUNT RECEIVED
11. TOTAL CONTRIBUTIONS RECEIVED AT FUND-RAISERS AS REPORTED INLINE 8 ON FORM CD1A			\$
12. TOTAL ANONYMOUS CONTRIBUTIONS RECEIVED FROM PERSON GIVING \$25 OR LESS			\$
13. TOTAL MONETARY CONTRIBUTIONS RECEIVED FROM PERSONS GIVING \$100 OR LESS			\$
14. TOTAL IN-KIND CONTRIBUTIONS RECEIVED FROM PERSONS (NOT COMMITTEES) GIVING \$100 OR LESS			\$
C. LOANS RECEIVED		16. DATE RECEIVED	17. AMOUNT OF LOAN (IF MORE THAN \$100 ATTACH CD-1B)
15. NAME AND ADDRESS OF LENDER			
NAME:			
ADDRESS:			
CITY / STATE:			\$
NAME:			
ADDRESS:			
CITY / STATE:			\$
18. SUBTOTAL: LOANS THIS PAGE (SUM COLUMN 17)			\$
19. SUBTOTAL: LOANS FROM ANY ATTACHED PAGES			\$
20. TOTAL: LOANS THIS PERIOD (SUM 18 + 19)			\$
21. TOTAL: ALL IN-KIND CONTRIBUTIONS (SUM 10 + 14)			\$
22. TOTAL: ALL MONETARY CONTRIBUTIONS (SUM 9, 11, 12 & 13)			\$
23. MONETARY CONTRIBUTIONS & LOANS RECEIVED REQUIRING A RECORD OF NAME & ADDRESS (SUM 9, 13 & 20)			\$



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS AND LOANS RECEIVED
INSTRUCTIONS ON REVERSE SIDE

OFFICE USE ONLY

1. NAME OF COMMITTEE <i>Bill H. For State Senate</i>		2. REPORT DATE <i>7/15/2006</i>	
A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.		4. DATE RECEIVED AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: <i>Oakland Properties Inc.</i> ADDRESS: <i>P.O. Box</i> CITY / STATE: <i>Arnold, MO 63010</i> EMPLOYER: <input type="checkbox"/> COMMITTEE:		<i>5/7/2006</i> \$ <i>150.00</i>	\$ <i>150.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>Kevin Bailey</i> ADDRESS: <i>5505 Chesterfield CV</i> CITY / STATE: <i>Rantlett, TX 78134</i> EMPLOYER: <input type="checkbox"/> COMMITTEE:		<i>5/7/2006</i> \$ <i>250.00</i>	\$ <i>250.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>Robert Cassidy</i> ADDRESS: <i>8844 Wheeler Rd.</i> CITY / STATE: <i>Marion, AR 72364</i> EMPLOYER: <input type="checkbox"/> COMMITTEE:		<i>5/7/2006</i> \$ <i>250.00</i>	\$ <i>250.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>Wendi B. Cood</i> ADDRESS: <i>4043 Prawn Hollow</i> CITY / STATE: <i>House Springs, MO 63051</i> EMPLOYER: <i>Self Employed / MGR.</i> <input type="checkbox"/> COMMITTEE:		<i>5/7/2006</i> \$ <i>650.00</i>	\$ <i>650.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>QC Holdings, Inc.</i> ADDRESS: <i>9401 Indian Creek Pkwy</i> CITY / STATE: <i>Overland Park, KS 66218</i> EMPLOYER: <input type="checkbox"/> COMMITTEE:		<i>5/7/2006</i> \$ <i>500.00</i>	\$ <i>500.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
6. SUBTOTAL: ITEMIZED CONTRIBUTIONS THIS PAGE (SUM COLUMN 5)			\$ <i>1800.00</i>
7. SUBTOTAL: ITEMIZED CONTRIBUTIONS ANY ATTACHED PAGES			+ \$
8. TOTAL: ITEMIZED CONTRIBUTIONS THIS PERIOD (SUM 6 + 7)			\$
9. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS MONETARY CONTRIBUTIONS			\$
10. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS IN-KIND CONTRIBUTIONS			\$
B. NON-ITEMIZED CONTRIBUTIONS RECEIVED (LIST BY CATEGORY, NOT BY INDIVIDUAL CONTRIBUTIONS)			AMOUNT RECEIVED
11. TOTAL CONTRIBUTIONS RECEIVED AT FUND-RAISERS AS REPORTED INLINE 8 ON FORM CD1A			\$
12. TOTAL ANONYMOUS CONTRIBUTIONS RECEIVED FROM PERSON GIVING \$25 OR LESS			\$
13. TOTAL MONETARY CONTRIBUTIONS RECEIVED FROM PERSONS GIVING \$100 OR LESS			\$
14. TOTAL IN-KIND CONTRIBUTIONS RECEIVED FROM PERSONS (NOT COMMITTEES) GIVING \$100 OR LESS			\$
C. LOANS RECEIVED		16. DATE RECEIVED	17. AMOUNT OF LOAN (IF MORE THAN \$100 ATTACH CD-1B)
15. NAME AND ADDRESS OF LENDER			
NAME:			
ADDRESS:			
CITY / STATE:			\$
NAME:			
ADDRESS:			
CITY / STATE:			\$
18. SUBTOTAL: LOANS THIS PAGE (SUM COLUMN 17)			\$
19. SUBTOTAL: LOANS FROM ANY ATTACHED PAGES			\$
20. TOTAL: LOANS THIS PERIOD (SUM 18 + 19)			\$
21. TOTAL: ALL IN-KIND CONTRIBUTIONS (SUM 10 + 14)			\$
22. TOTAL: ALL MONETARY CONTRIBUTIONS (SUM 9, 11, 12 & 13)			\$
23. MONETARY CONTRIBUTIONS & LOANS RECEIVED REQUIRING A RECORD OF NAME & ADDRESS (SUM 9, 13 & 20)			\$



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS AND LOANS RECEIVED
INSTRUCTIONS ON REVERSE SIDE

OFFICE USE ONLY

1. NAME OF COMMITTEE <i>Bill Alter for State Senate</i>		2. REPORT DATE <i>7/15/2006</i>	
A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE.		4. DATE RECEIVED AGGREGATE TO DATE	5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND)
3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) NAME: <i>Gary A. Romine</i> ADDRESS: <i>19557 State Route E</i> CITY / STATE: <i>Parsons, MO 63640</i> EMPLOYER: <i>Parsons, MO 63640</i> <input type="checkbox"/> COMMITTEE: <i>Self Employed</i>		<i>5/21/2006</i> \$ <i>625.00</i>	\$ <i>625.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>Dan Francis</i> ADDRESS: <i>5700 Montebello Rd</i> CITY / STATE: <i>Imperial, MO 63052</i> EMPLOYER: <i>St Louis Project / President</i> <input type="checkbox"/> COMMITTEE:		<i>5/21/2006</i> \$ <i>650.00</i>	\$ <i>650.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>Dawn Francis</i> ADDRESS: <i>5700 Montebello Rd.</i> CITY / STATE: <i>Imperial, MO 63052</i> EMPLOYER: <i>Homemaker</i> <input type="checkbox"/> COMMITTEE:		<i>5/21/2006</i> \$ <i>650.00</i>	\$ <i>650.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>Richard R. Baalman</i> ADDRESS: <i>11713 Manchester Rd.</i> CITY / STATE: <i>St. Louis, MO 63131</i> EMPLOYER: <i>BRAMM Inc. / Chairman</i> <input type="checkbox"/> COMMITTEE:		<i>6/25/2006</i> \$ <i>500.00</i>	\$ <i>500.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
NAME: <i>Kari Schindelhette</i> ADDRESS: <i>3108 County Bluff Dr.</i> CITY / STATE: <i>St. Charles, MO 63301</i> EMPLOYER: <i>St. Charles, MO 63301</i> <input type="checkbox"/> COMMITTEE:		<i>6/25/2006</i> \$ <i>500.00</i>	\$ <i>500.00</i> <input checked="" type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND
6. SUBTOTAL: ITEMIZED CONTRIBUTIONS THIS PAGE (SUM COLUMN 5)			\$ <i>2925</i>
7. SUBTOTAL: ITEMIZED CONTRIBUTIONS ANY ATTACHED PAGES			+ \$
8. TOTAL: ITEMIZED CONTRIBUTIONS THIS PERIOD (SUM 6 + 7)			\$
9. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS MONETARY CONTRIBUTIONS			\$
10. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS IN-KIND CONTRIBUTIONS			\$
B. NON-ITEMIZED CONTRIBUTIONS RECEIVED (LIST BY CATEGORY, NOT BY INDIVIDUAL CONTRIBUTIONS)			AMOUNT RECEIVED
11. TOTAL CONTRIBUTIONS RECEIVED AT FUND-RAISERS AS REPORTED INLINE 8 ON FORM CD1A			\$
12. TOTAL ANONYMOUS CONTRIBUTIONS RECEIVED FROM PERSON GIVING \$25 OR LESS			\$
13. TOTAL MONETARY CONTRIBUTIONS RECEIVED FROM PERSONS GIVING \$100 OR LESS			\$
14. TOTAL IN-KIND CONTRIBUTIONS RECEIVED FROM PERSONS (NOT COMMITTEES) GIVING \$100 OR LESS			\$
C. LOANS RECEIVED		16. DATE RECEIVED	17. AMOUNT OF LOAN (IF MORE THAN \$100 ATTACH CD-1B)
15. NAME AND ADDRESS OF LENDER			
NAME:			
ADDRESS:			
CITY / STATE:			\$
NAME:			
ADDRESS:			
CITY / STATE:			\$
18. SUBTOTAL: LOANS THIS PAGE (SUM COLUMN 17)			\$
19. SUBTOTAL: LOANS FROM ANY ATTACHED PAGES			\$
20. TOTAL: LOANS THIS PERIOD (SUM 18 + 19)			\$
21. TOTAL: ALL IN-KIND CONTRIBUTIONS (SUM 10 + 14)			\$
22. TOTAL: ALL MONETARY CONTRIBUTIONS (SUM 9, 11, 12 & 13)			\$
23. MONETARY CONTRIBUTIONS & LOANS RECEIVED REQUIRING A RECORD OF NAME & ADDRESS (SUM 9, 13 & 20)			\$



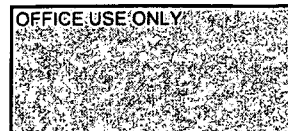
MISSOURI ETHICS COMMISSION
EXPENDITURES AND CONTRIBUTIONS MADE
INSTRUCTIONS ON REVERSE SIDE

OFFICE USE ONLY

1. NAME OF COMMITTEE <i>Bill Alter for State Senate</i>		2. REPORT DATE <i>7/15/2006</i>	
A. EXPENDITURES OF \$100 OR LESS BY CATEGORY (LIST PAYMENTS TO CAMPAIGN WORKERS IN SECTION B BELOW)		4. AMOUNT PAID OR INCURRED THIS PERIOD	
3. CATEGORY OF EXPENDITURE			
<i>Bank Service Charges</i>		\$ <i>15.00</i>	
<i>Dinner Tickets</i>		\$ <i>70.00</i>	
5. SUBTOTAL: NON-ITEMIZED EXPENDITURES THIS PAGE (SUM COLUMN 4)		\$ <i>85.00</i>	
6. SUBTOTAL: NON-ITEMIZED EXPENDITURES ANY ATTACHED PAGES		+ \$ <i>75.00</i>	
7. TOTAL: NON-ITEMIZED EXPENDITURES THIS PERIOD (SUM 5 + 6)		\$ <i>160.00</i>	
B. ITEMIZED EXPENDITURES ALL OVER \$100 AND ALL PAYMENTS TO CAMPAIGN WORKERS		10. PURPOSE - (IF PAYMENT WAS TO A CAMPAIGN WORKER, SHOW AGGREGATE PAID)	
8. NAME AND ADDRESS OF RECIPIENT		9. DATE	11. AMOUNT THIS PERIOD
NAME: <i>MASRP</i> ADDRESS: <i>P.O. Box 54</i> CITY / STATE: <i>Crested City, MO 63019</i>		<i>4/8/2006</i>	<i>Donation</i> \$ <i>500.00</i> <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: <i>Scott A. Steele</i> ADDRESS: <i>1332 Meadowbrook Ct.</i> CITY / STATE: <i>St. Charles, MO 63303</i>		<i>4/18/2006</i>	<i>Raiding Expense</i> \$ <i>912.82</i> <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: <i>Strategic Communications</i> ADDRESS: <i>P.O. Box 1372</i> CITY / STATE: <i>Cape Girardeau, MO 63702</i>		<i>4/18/2006</i>	<i>Printing Expense</i> \$ <i>476.47</i> <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: <i>Scott A. Steele</i> ADDRESS: <i>(See above)</i> CITY / STATE: <i>(See above)</i>		<i>5/5/2006</i>	<i>Raiding Expense</i> \$ <i>640.00</i> <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
NAME: <i>Scott A. Steele</i> ADDRESS: <i>(See above)</i> CITY / STATE: <i>(See above)</i>		<i>5/21/2006</i>	<i>Expense Reimbursement</i> \$ <i>233.00</i> <input checked="" type="checkbox"/> PAID <input type="checkbox"/> INCURRED
12. SUBTOTAL: THIS PAGE (SUM COLUMN 11)		\$ <i>2762.29</i>	
13. SUBTOTAL: ANY ATTACHED PAGES		+ \$ <i>790.12</i>	
14. TOTAL: ITEMIZED EXPENDITURES THIS PERIOD (SUM 12 + 13)		\$ <i>3552.41</i>	
15. TOTAL: MONETARY EXPENDITURES THIS PERIOD (SUM 7 + 14)		\$ <i>3712.41</i>	
16. AMOUNT OF LINE 15 WHICH WAS PAID OUT THIS PERIOD		\$	
17. AMOUNT OF LINE 15 WHICH WAS DEBT INCURRED THIS PERIOD		\$	
18. IF COMMITTEE MADE ANY IN-KIND EXPENDITURES THIS PERIOD, LIST AMOUNT		\$	
19. FUNDS USED FOR REPAYING LOANS THIS PERIOD (ATTACH FORM CD1B)		\$	
C. MONETARY CONTRIBUTIONS MADE (REGARDLESS OF AMOUNT)		21. DATE	22. AMOUNT
20. NAME AND ADDRESS OF CANDIDATE OR COMMITTEE			
NAME:			
ADDRESS:			
CITY / STATE:			\$
NAME:			
ADDRESS:			
CITY / STATE:			\$
NAME:			
ADDRESS:			
CITY / STATE:			\$
23. SUBTOTAL: THIS PAGE (SUM COLUMN 22)		\$	
24. SUBTOTAL: ANY ATTACHED PAGES		+ \$	
25. TOTAL: MONETARY CONTRIBUTIONS MADE THIS PERIOD (SUM 23 + 24)		\$	
26. IF COMMITTEE MADE ANY LOANS THIS PERIOD, LIST AMOUNT		\$	
27. TOTAL: ALL MONETARY CONTRIBUTIONS AND LOANS MADE THIS PERIOD (SUM 25 + 26)		\$	
28. IF COMMITTEE MADE ANY IN-KIND CONTRIBUTIONS THIS PERIOD, LIST AMOUNT		\$	



MISSOURI ETHICS COMMISSION
EXPENDITURES AND CONTRIBUTIONS MADE
INSTRUCTIONS ON REVERSE SIDE



1. NAME OF COMMITTEE <i>Bill Alter for State Senate</i>		2. REPORT DATE <i>7/15/2006</i>	
A. EXPENDITURES OF \$100 OR LESS BY CATEGORY (LIST PAYMENTS TO CAMPAIGN WORKERS IN SECTION B BELOW)		4. AMOUNT PAID OR INCURRED THIS PERIOD	
3. CATEGORY OF EXPENDITURE <i>Ads</i>		\$ <i>75.00</i>	
		\$	
5. SUBTOTAL: NON-ITEMIZED EXPENDITURES THIS PAGE (SUM COLUMN 4)		\$ <i>75.00</i>	
6. SUBTOTAL: NON-ITEMIZED EXPENDITURES ANY ATTACHED PAGES		+ \$	
7. TOTAL: NON-ITEMIZED EXPENDITURES THIS PERIOD (SUM 5 + 6)		\$	
B. ITEMIZED EXPENDITURES ALL OVER \$100 AND ALL PAYMENTS TO CAMPAIGN WORKERS		10. PURPOSE - (IF PAYMENT WAS TO A CAMPAIGN WORKER, SHOW AGGREGATE PAID)	
8. NAME AND ADDRESS OF RECIPIENT		9. DATE	11. AMOUNT THIS PERIOD
NAME: <i>Scott A. Steele</i>		<i>6/5/2006</i>	<i>Printing Expense</i> \$ <i>580.00</i>
ADDRESS: <i>(see above)</i>			<input checked="" type="checkbox"/> PAID
CITY / STATE:			<input type="checkbox"/> INCURRED
NAME: <i>Thomson Printing Company</i>		<i>6/20/2006</i>	\$ <i>4783.75</i>
ADDRESS: <i>601 W. Kingshighway</i>			<input checked="" type="checkbox"/> PAID
CITY / STATE: <i>St. Charles, MO 63301</i>			<input type="checkbox"/> INCURRED
NAME:			\$
ADDRESS:			<input type="checkbox"/> PAID
CITY / STATE:			<input type="checkbox"/> INCURRED
NAME:			\$
ADDRESS:			<input type="checkbox"/> PAID
CITY / STATE:			<input type="checkbox"/> INCURRED
NAME:			\$
ADDRESS:			<input type="checkbox"/> PAID
CITY / STATE:			<input type="checkbox"/> INCURRED
12. SUBTOTAL: THIS PAGE (SUM COLUMN 11)		\$ <i>790.12</i>	
13. SUBTOTAL: ANY ATTACHED PAGES		+ \$	
14. TOTAL: ITEMIZED EXPENDITURES THIS PERIOD (SUM 12 + 13)		\$	
15. TOTAL: MONETARY EXPENDITURES THIS PERIOD (SUM 7 + 14)		\$	
16. AMOUNT OF LINE 15 WHICH WAS PAID OUT THIS PERIOD		\$	
17. AMOUNT OF LINE 15 WHICH WAS DEBT INCURRED THIS PERIOD		\$	
18. IF COMMITTEE MADE ANY IN-KIND EXPENDITURES THIS PERIOD, LIST AMOUNT		\$	
19. FUNDS USED FOR REPAYING LOANS THIS PERIOD (ATTACH FORM CD1B)		\$	
C. MONETARY CONTRIBUTIONS MADE (REGARDLESS OF AMOUNT)		21. DATE	22. AMOUNT
20. NAME AND ADDRESS OF CANDIDATE OR COMMITTEE			
NAME:			
ADDRESS:			
CITY / STATE:			\$
NAME:			
ADDRESS:			
CITY / STATE:			\$
NAME:			
ADDRESS:			
CITY / STATE:			\$
23. SUBTOTAL: THIS PAGE (SUM COLUMN 22)		\$	
24. SUBTOTAL: ANY ATTACHED PAGES		+ \$	
25. TOTAL: MONETARY CONTRIBUTIONS MADE THIS PERIOD (SUM 23 + 24)		\$	
26. IF COMMITTEE MADE ANY LOANS THIS PERIOD, LIST AMOUNT		\$	
27. TOTAL: ALL MONETARY CONTRIBUTIONS AND LOANS MADE THIS PERIOD (SUM 25 + 26)		\$	
28. IF COMMITTEE MADE ANY IN-KIND CONTRIBUTIONS THIS PERIOD, LIST AMOUNT		\$	